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**FAX TRANSMITTAL SHEET**

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**19** Number of Pages (including this page)

Date: September 16, 2004

To: David J. Huisman - 2183

Location: United States Patent and Trademark Office

Fax No.: (703) 872-9306

From: Joanna G. Chiu - 43,629

Subject: 09/667,122 - William C. Moyer

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**MESSAGE:**

Enclosed herewith, please find 1 page Request for Continued Examination, 15 page Preliminary Amcndmment and 1 page Fee Transmittal (in duplicate) for filing in the below-identified application.

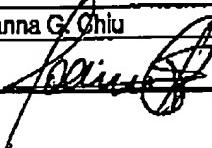
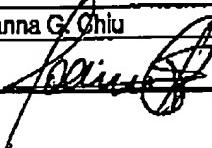
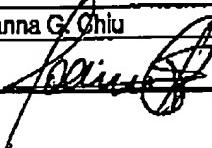
**PLEASE GIVE THESE PAPERS TO:**

EXAMINER: David J. Huisman  
GROUP ART UNIT: 2183  
SERIAL NO.: 09/667,122  
FILED: SEPTEMBER 21, 2000  
INVENTOR: WILLIAM C. MOYER

|                                |                |                               |                    |
|--------------------------------|----------------|-------------------------------|--------------------|
| <b>FEE TRANSMITTAL</b>         |                | <i>Complete If Known</i>      |                    |
|                                |                | Application Number            | 09/667,122         |
|                                |                | Filing Date                   | September 21, 2000 |
|                                |                | First Named Inventor          | William C. Moyer   |
|                                |                | Examiner Name                 | David J. Huisman   |
|                                |                | Group Art Unit                | 2183               |
| <b>TOTAL AMOUNT OF PAYMENT</b> | <b>(S) 910</b> | Attorney Docket No. SC11306TH |                    |

| <b>METHOD OF PAYMENT (check all that apply)</b>  |   |                |                 | <b>FEES CALCULATION (continued)</b>  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
|--|---|----------------|-----------------|--|----------------------|----------------------|----------------------|--------------|--------------|--|--|----------|----------|----------|----------|-----------------|------|-----|------|----|-------------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|---------------------------|------|------|------|------|---|------|------|------|------|--|------|-------|------|-------|---|------|-----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|------|------|-----|---|------|------|------|------|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|-----|------|-----|--------------------------|------|------|------|------|---|------|-----|------|----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|---------------------|--|--|--|--------------------------|--|--|--|-------------------------------------|--|--|--|------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--------------------------|--|--|--|-------------------|-----------------------|--|--|------------------|--------|-----------|----------------|-----------|---|--|--|------|---------|--|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>503079</b><br>Deposit Account Name <b>Freescale Semiconductor, Inc.</b>   |   |                |                 | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>85</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1806</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>65</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1808</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of previous)</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="4">Other fee (specify)</td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1) (\$)</b></td> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (3) (\$)</b> <b>770</b></td> </tr> <tr> <td colspan="8" style="text-align: center;">* Reduced by Basic Filing Fee Paid</td> </tr> <tr> <td colspan="4"></td> <td colspan="4" style="text-align: center;">Complete (if applicable)</td> </tr> <tr> <td>Name (Print/Type)</td> <td colspan="3"><b>Joanna G. Chiu</b></td> <td>Registration No.</td> <td>43,629</td> <td>Telephone</td> <td>(512) 996-6839</td> </tr> <tr> <td>Signature</td> <td colspan="3"></td> <td>Date</td> <td colspan="3">9-16-04</td> </tr> </tbody> </table> |                      |                      |                      | Large Entity | Small Entity |  |  | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | 1051 | 130 | 2051 | 85 | Surcharge - late filing fee or oath | 1052 | 50 | 2052 | 25 | Surcharge - late Provisional filing | 1053 | 130 | 1053 | 130 | Non-English specification | 1812 | 2520 | 1812 | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | 1806 | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 110 | 2251 | 65 | Extension for reply within first month | 1252 | 420 | 2252 | 210 | Extension for reply within second month | 1253 | 950 | 2253 | 475 | Extension for reply within third month | 1254 | 1480 | 2254 | 740 | Extension for reply within fourth month | 1255 | 2010 | 2255 | 1005 | Extension for reply within fifth month | 1401 | 330 | 2401 | 165 | Notice of Appeal | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | 1403 | 290 | 2403 | 145 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | 1453 | 1330 | 2453 | 665 | Petition to revive - unintentional | 1501 | 1330 | 2501 | 665 | Utility issue fee (or reissue) | 1502 | 480 | 2502 | 240 | Design issue fee | 1503 | 640 | 2503 | 320 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | 1808 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of previous) | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify) |  |  |  | <b>SUBTOTAL (1) (\$)</b> |  |  |  | <b>SUBTOTAL (3) (\$)</b> <b>770</b> |  |  |  | * Reduced by Basic Filing Fee Paid |  |  |  |  |  |  |  |  |  |  |  | Complete (if applicable) |  |  |  | Name (Print/Type) | <b>Joanna G. Chiu</b> |  |  | Registration No. | 43,629 | Telephone | (512) 996-6839 | Signature |  |  |  | Date | 9-16-04 |  |  |
| Large Entity   | Small Entity  |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Fee Code   | Fee (\$)  | Fee Code       | Fee (\$)        | Fee Description  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1051   | 130   | 2051           | 85              | Surcharge - late filing fee or oath  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1052   | 50  | 2052           | 25              | Surcharge - late Provisional filing  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1053   | 130   | 1053           | 130             | Non-English specification  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1812   | 2520  | 1812           | 2520            | For filing a request for ex parte Reexamination  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1804   | 920*  | 1804           | 920*            | Requesting publication of SIR prior to Examiner action   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1806   | 1840*   | 1805           | 1840*           | Requesting publication of SIR after Examiner action  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1251   | 110   | 2251           | 65              | Extension for reply within first month   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1252   | 420   | 2252           | 210             | Extension for reply within second month  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1253   | 950   | 2253           | 475             | Extension for reply within third month   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1254   | 1480  | 2254           | 740             | Extension for reply within fourth month  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1255   | 2010  | 2255           | 1005            | Extension for reply within fifth month   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1401   | 330   | 2401           | 165             | Notice of Appeal   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1402   | 330   | 2402           | 165             | Filing a brief in support of an appeal   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1403   | 290   | 2403           | 145             | Request for oral hearing   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1451   | 1510  | 1451           | 1510            | Petition to institute a public use proceeding  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1452   | 110   | 2452           | 55              | Petition to revive - unavoidable   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1453   | 1330  | 2453           | 665             | Petition to revive - unintentional   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1501   | 1330  | 2501           | 665             | Utility issue fee (or reissue)   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1502   | 480   | 2502           | 240             | Design issue fee   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1503   | 640   | 2503           | 320             | Plant issue fee  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1460   | 130   | 1460           | 130             | Petitions to the Commissioner  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1807   | 50  | 1807           | 50              | Processing fee under 37 CFR 1.17(q)  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1808   | 180   | 1806           | 180             | Submission of IDS  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 8021   | 40  | 8021           | 40              | Recording each patent assignment per property (times number of previous)   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1809   | 770   | 2809           | 385             | Filing a submission after final rejection (37 CFR § 1.129(a))  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1810   | 770   | 2810           | 385             | For each additional invention to be examined (37 CFR § 1.129(b))   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1801   | 770   | 2801           | 385             | Request for Continued Examination (RCE)  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1802   | 900   | 1802           | 900             | Request for expedited examination of a design application  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Other fee (specify)  |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| <b>SUBTOTAL (1) (\$)</b>   |   |                |                 | <b>SUBTOTAL (3) (\$)</b> <b>770</b>  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| * Reduced by Basic Filing Fee Paid   |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
|  |   |                |                 | Complete (if applicable)   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Name (Print/Type)  | <b>Joanna G. Chiu</b>   |                |                 | Registration No.   | 43,629               | Telephone            | (512) 996-6839       |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Signature  |  |                |                 | Date   | 9-16-04              |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account. |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| <b>FEES CALCULATION</b>  |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| <b>1. BASIC FILING FEE</b>   |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code | Entity Fee (\$) | Fee Paid   |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1001   | 770   | 2001           | 385             | Utility filing fee   | <input type="text"/> | <input type="text"/> | <input type="text"/> |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1002   | 340   | 2002           | 170             | Design filing fee  | <input type="text"/> | <input type="text"/> | <input type="text"/> |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1003   | 690   | 2003           | 265             | Plant filing fee   | <input type="text"/> | <input type="text"/> | <input type="text"/> |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1004   | 780   | 2004           | 385             | Reissue filing fee   | <input type="text"/> | <input type="text"/> | <input type="text"/> |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| 1005   | 160   | 2005           | 80              | Provisional filing fee   | <input type="text"/> | <input type="text"/> | <input type="text"/> |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| <b>SUBTOTAL (1) (\$)</b>   |   |                |                 | <b>SUBTOTAL (3) (\$)</b> <b>770</b>  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| * or number previously paid, if greater; For Reissues, see above.  |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| <b>SUBMITTED BY</b>  |   |                |                 |  |                      |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Name (Print/Type)  | <b>Joanna G. Chiu</b>   |                |                 | Registration No.   | 43,629               | Telephone            | (512) 996-6839       |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |
| Signature  |  |                |                 | Date   | 9-16-04              |                      |                      |              |              |  |  |          |          |          |          |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                     |  |  |  |                          |  |  |  |                                     |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |                          |  |  |  |                   |                       |  |  |                  |        |           |                |           |   |  |  |      |         |  |  |

|  |  |                               |                    |
|--|--|-------------------------------|--------------------|
| <b>FEE TRANSMITTAL</b>   |  | <i>Complete If Known</i>      |                    |
| Patent fees are subject to annual revision                                     |  | Application Number            | 09/667,122         |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | Filing Date                   | September 21, 2000 |
|  |  | First Named Inventor          | William C. Moyer   |
|  |  | Examiner Name                 | David J. Huisman   |
|  |  | Group Art Unit                | 2183               |
| TOTAL AMOUNT OF PAYMENT (\$ 910)   |  | Attorney Docket No. SC11306TH |                    |

| METHOD OF PAYMENT (check all that apply)   |   |                            |       |  | FEE CALCULATION (continued)  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
|--|---|----------------------------|-------|--|--|---------|-----------|----------------|--|----------------------------|-----|----------------------------|-----|-----------------|------|-----|------|----|-------------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|---------------------------|------|------|------|------|---|------|------|------|------|--|------|-------|------|-------|---|------|-----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|------|------|-----|---|------|------|------|------|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|-----|------|-----|--------------------------|------|------|------|------|---|------|-----|------|----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|---------------------------|--|--|--|--|-----------------------|--|--|--|--|-----------------------|--|--|--|--|------------------------------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--------------------------|--|--|--|--|-------------------|----------------|--|--|--|------------------|--------|-----------|----------------|--|-----------|---|--|--|--|------|---------|--|--|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>503079</b><br>Deposit Account Name <b>Freescale Semiconductor, Inc.</b> |   |                            |       |  | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Fee</th> <th>Small Entity Fee Code (\$)</th> <th>Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>2053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>685</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1330</td><td>2501</td><td>685</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>840</td><td>2503</td><td>320</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1) (\$ 910)</td> <td colspan="5" style="text-align: right;">SUBTOTAL (3) (\$ 770)</td> </tr> <tr> <td colspan="10" style="text-align: center;">* Reduced by Basic Filing Fee Paid</td> </tr> <tr> <td colspan="5">SUBMITTED BY</td> <td colspan="5" style="text-align: center;">Complete (If applicable)</td> </tr> <tr> <td>Name (Print/Type)</td> <td colspan="4">Joanna C. Chiu</td> <td>Registration No.</td> <td>43,629</td> <td>Telephone</td> <td colspan="2">(512) 996-6839</td> </tr> <tr> <td>Signature</td> <td colspan="4"></td> <td>Date</td> <td colspan="4">9-16-04</td> </tr> </tbody> </table> |         |           |                |  | Large Entity Fee Code (\$) | Fee | Small Entity Fee Code (\$) | Fee | Fee Description | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | 1052 | 50 | 2052 | 25 | Surcharge - late Provisional filing | 1053 | 130 | 2053 | 130 | Non-English specification | 1812 | 2520 | 1812 | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 110 | 2251 | 55 | Extension for reply within first month | 1252 | 420 | 2252 | 210 | Extension for reply within second month | 1253 | 950 | 2253 | 475 | Extension for reply within third month | 1254 | 1480 | 2254 | 740 | Extension for reply within fourth month | 1255 | 2010 | 2255 | 1005 | Extension for reply within fifth month | 1401 | 330 | 2401 | 165 | Notice of Appeal | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | 1403 | 290 | 2403 | 145 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | 1453 | 1330 | 2453 | 685 | Petition to revive - unintentional | 1501 | 1330 | 2501 | 685 | Utility issue fee (or reissue) | 1502 | 480 | 2502 | 240 | Design issue fee | 1503 | 840 | 2503 | 320 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  | SUBTOTAL (1) (\$ 910) |  |  |  |  | SUBTOTAL (3) (\$ 770) |  |  |  |  | * Reduced by Basic Filing Fee Paid |  |  |  |  |  |  |  |  |  | SUBMITTED BY |  |  |  |  | Complete (If applicable) |  |  |  |  | Name (Print/Type) | Joanna C. Chiu |  |  |  | Registration No. | 43,629 | Telephone | (512) 996-6839 |  | Signature |  |  |  |  | Date | 9-16-04 |  |  |  |
| Large Entity Fee Code (\$)   | Fee   | Small Entity Fee Code (\$) | Fee   | Fee Description  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1051   | 130   | 2051                       | 65    | Surcharge - late filing fee or oath  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1052   | 50  | 2052                       | 25    | Surcharge - late Provisional filing  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1053   | 130   | 2053                       | 130   | Non-English specification  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1812   | 2520  | 1812                       | 2520  | For filing a request for ex parte Reexamination                            |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1804   | 920*  | 1804                       | 920*  | Requesting publication of SIR prior to Examiner action                     |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1805   | 1840*   | 1805                       | 1840* | Requesting publication of SIR after Examiner action                        |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1251   | 110   | 2251                       | 55    | Extension for reply within first month                                     |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1252   | 420   | 2252                       | 210   | Extension for reply within second month                                    |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1253   | 950   | 2253                       | 475   | Extension for reply within third month                                     |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1254   | 1480  | 2254                       | 740   | Extension for reply within fourth month                                    |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1255   | 2010  | 2255                       | 1005  | Extension for reply within fifth month                                     |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1401   | 330   | 2401                       | 165   | Notice of Appeal   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1402   | 330   | 2402                       | 165   | Filing a brief in support of an appeal                                     |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1403   | 290   | 2403                       | 145   | Request for oral hearing   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1451   | 1510  | 1451                       | 1510  | Petition to institute a public use proceeding                              |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1452   | 110   | 2452                       | 55    | Petition to revive - unavoidable   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1453   | 1330  | 2453                       | 685   | Petition to revive - unintentional   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1501   | 1330  | 2501                       | 685   | Utility issue fee (or reissue)   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1502   | 480   | 2502                       | 240   | Design issue fee   |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1503   | 840   | 2503                       | 320   | Plant issue fee  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1460   | 130   | 1460                       | 130   | Petitions to the Commissioner  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1807   | 50  | 1807                       | 50    | Processing fee under 37 CFR 1.17(q)  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1806   | 180   | 1806                       | 180   | Submission of IDS  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 8021   | 40  | 8021                       | 40    | Recording each patent assignment per property (times number of properties) |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1809   | 770   | 2809                       | 385   | Filing a submission after final rejection (37 CFR § 1.129(a))              |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1810   | 770   | 2810                       | 385   | For each additional invention to be examined (37 CFR § 1.129(b))           |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1801   | 770   | 2801                       | 385   | Request for Continued Examination (RCE)                                    |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| 1802   | 900   | 1802                       | 900   | Request for expedited examination of a design application                  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| Other fee (specify) _____  |   |                            |       |  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| SUBTOTAL (1) (\$ 910)  |   |                            |       |  | SUBTOTAL (3) (\$ 770)  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| * Reduced by Basic Filing Fee Paid   |   |                            |       |  |  |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| SUBMITTED BY   |   |                            |       |  | Complete (If applicable)   |         |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| Name (Print/Type)  | Joanna C. Chiu  |                            |       |  | Registration No.   | 43,629  | Telephone | (512) 996-6839 |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |
| Signature  |  |                            |       |  | Date   | 9-16-04 |           |                |  |                            |     |                            |     |                 |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |                       |  |  |  |  |                       |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |              |  |  |  |  |                          |  |  |  |  |                   |                |  |  |  |                  |        |           |                |  |           |   |  |  |  |      |         |  |  |  |

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